

COMPREHENSIVE PERINATAL SERVICES PROGRAM

Service Codes and Reimbursement Schedule

The following are the Comprehensive Perinatal Provider service codes effective August 1, 2000 for Nutrition, Health Education, and Psychosocial services.

Procedure Code	Description	When to Use	Maximum Units of Service	Reimbursement per Unit of Service	Maximum Reimbursement ¹
Z6500 ²	Initial Comprehensive Nutrition, Psychosocial, and Health Education Assessments and Development of Care Plan within 4 weeks of entry into care ³ , Individual, first 30 minutes of each Assessment (90 minutes total), including ongoing coordination of care. Initial Pregnancy-related exam (Z1032) must also be completed within this 4 week period.	Initial CPSP Assessment completed within 4 weeks of Initial Prenatal Exam (Z1032). This 90 minutes is for Health Educ., Nutrition, and Psychosocial initial assessment time only - does not include Client Orientation.	1	\$135.83	\$135.83
NUTRITION CODES					
Z6200	Initial Nutrition Assessment and Development of Care Plan, Individual, first 30 minutes.	For first 30 minutes of Initial Nutrition Assessment when Initial CPSP Assessment not completed within 4 weeks of Initial Prenatal Exam (Z1032).	1	\$16.83	\$16.83
Z6202	Initial Nutrition Assessment and development of Care Plan, Individual, each Subsequent 15 minutes (Maximum of 1 ½ hours)	1) Time spent doing initial assessment exceeded 30 minutes in nutrition component (either Z6500 or Z6200 used); 2) "Entirely new problem" diagnosed later in pregnancy requiring a new nutrition assessment, e.g. gestational diabetes.	6	\$8.41	\$50.46
Z6204	Follow-up Antepartum Nutrition Assessment, Treatment, and/or Intervention, Individual, each 15 minutes (Maximum of 2 hours)	Trimester reassessments; <u>antepartum</u> counseling, such as by RD consultant.	8	\$8.41	\$67.28

Z6206	Follow-up Antepartum Nutrition Assessment, Treatment, and/or Intervention, Group, per patient, each 15 minutes (Maximum of 3 hours)	Nutrition information provided in a group class.	12	\$2.81	\$33.72
Z6208	Postpartum Nutrition Assessment, Treatment, and/or Intervention, including update of Care Plan, Individual, each 15 minutes (Maximum of 1 hour)	1) Postpartum nutrition assessment; 2) Postpartum nutrition intervention, e.g. assistance with breastfeeding	4	\$8.41	\$33.64
Z6210	Prenatal Vitamin-Mineral Supplement, 300 Day Supply	Prenatal vitamins dispensed by office; cannot bill until all 300 have been dispensed	1	\$39.96	\$39.96
PSYCHOSOCIAL CODES					
Z6300	Initial Psychosocial Assessment and Development of Care Plan, Individual, first 30 minutes	For first 30 minutes of Initial Psychosocial Assessment when Initial CPSP Assessment not completed within 4 weeks of Initial Prenatal Exam (Z1032).	1	\$16.83	\$16.83
Z6302	Initial Psychosocial Assessment and Development of Care Plan, Individual, each subsequent 15 minutes (Maximum of 1 ½ hours)	1) Time spent doing initial assessment exceeded 30 minutes in psychosocial component (either Z6500 or Z6300 used); 2) "Entirely new problem" diagnosed later in pregnancy requiring a new psychosocial assessment, e.g. domestic violence.	6	\$8.41	\$50.46
Z6304	Follow-up Antepartum Psychosocial Assessment, Treatment, and/or Intervention, Individual, each 15 minutes (Maximum of 3 hours)	Trimester reassessment; <u>antepartum</u> counseling or other intervention, such as by social work consultant.	12	\$8.41	\$100.92
Z6306	Follow-up Antepartum Psychosocial Assessment, Treatment, and/or Intervention, Group, per patient, each 15 minutes (Maximum of 4 hours)	Psychosocial information provided in a group class.	16	\$2.81	\$44.96

Z6308	Postpartum Psychosocial Assessment, Treatment, and/or Intervention, including update of Care Plan, Individual, each 15 minutes (Maximum of 1½ hours)	1) Postpartum psychosocial assessment; 2) Postpartum psychosocial intervention, e.g. postpartum depression	6	\$8.41	\$50.46
HEALTH EDUCATION CODES					
Z6400	Client Orientation, Individual, each 15 minutes (Maximum of 2 hours)	Initial <u>individual</u> orientation (required); orientation required during pregnancy, e.g. when patient is referred to hospital for non-stress test.	8	\$8.41	\$67.28
Z6402	Initial Health Education Assessment and Development of Care Plan, Individual, first 30 minutes	For first 30 minutes of Initial Health Education Assessment when Initial CPSP Assessment not completed within 4 weeks of Initial Prenatal Exam (Z1032).	1	\$16.83	\$16.83
Z6404	Initial Health Education Assessment and Development of Care Plan, Individual, each subsequent 15 minutes (Maximum of 2 hours)	1) Time spent doing initial assessment exceeded 30 minutes in health education component (either Z6500 or Z6402 used); 2) "Entirely new problem" diagnosed later in pregnancy requiring a new health education assessment.	8	\$8.41	\$67.28
Z6406	Follow-up Antepartum Health Education Assessment, Treatment, and/or Intervention, Individual, each 15 minutes (Maximum of 2 hours)	Trimester reassessment; <u>antepartum</u> counseling or other intervention, such as by health education consultant.	8	\$8.41	\$67.28
Z6408	Follow-up Antepartum Health Education Assessment, Treatment, and/or Intervention, Group, per patient, each 15 minutes (Maximum of 2 hours)	Health education provided in a group class.	8	\$2.81	\$22.48

Z6414	Postpartum Health Education Assessment, Treatment, and/or Intervention, including update of Care Plan, Individual, each 15 minutes (Maximum of 1 hour)	1) Postpartum health education assessment; 2) Postpartum health education intervention.	4	\$8.41	\$33.64
PERINATAL EDUCATION CODES (Can be used antepartum or postpartum)					
Z6410	Perinatal Education, Individual, each 15 minutes (Maximum of 4 hours)	Individual education provided prenatally or postpartum.	16	\$8.41	\$134.56
Z6412	Perinatal Education, Group, per patient, each 15 minutes (Maximum 4 hours/day, 18 hours/pregnancy)	Group education, e.g. childbirth education (Lamaze)	72	\$2.81	\$202.32
CPSP OB BONUSES					
Z1032-ZL	Initial Comprehensive Pregnancy-related office visit performed within 16 weeks of LMP	Initial prenatal exam done prior to 17 weeks LMP. <i>If non-physician practitioner (NP, PA, CNM) does exam, see M/C Provider Manual for appropriate modifier.</i>	1	\$56.63	\$56.63
Z1036	Tenth Antepartum Office Visit	One time only when 10 th antepartum visit performed.	1	\$113.26	\$113.26

¹ Additional reimbursement is subject to prior approval using a Medi-Cal Treatment Authorization Request (TAR).

² If Z6500 is used, codes Z6200, Z6300, and Z6402 cannot be used because the first 30 minutes of each assessment is already included in Z6500. However, additional initial assessment time can be billed under codes Z6202, Z6302, or Z6404.

³ Entry into care is the time of the first billable pregnancy-related office visit or initial support service assessment.